

CLEMENCY ACTION RECORD

For use of this form, see AR 15-130; the proponent agency is OSA

LAST NAME	FIRST NAME	MIDDLE INITIAL	SOCIAL SECURITY NUMBER
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SECTION I - RECOMMENDATIONS OF THE ANALYST

NO CLEMENCY

OTHER

REMIT IN EXCESS OF

YRS

REMIT UNEX PORTION OF SENTENCE

TO CNF

GRANT DISCHARGE

☐

HON

☐

GEN

☐

UTOHC

☐

BCD

TRANSFER RETRAINING BRIGADE

SIGNATURE OF ANALYST

DATE

SECTION II - RECOMMENDATIONS OF THE ARMY CLEMENCY AND PAROLE BOARD

NO CLEMENCY

OTHER

REMIT IN EXCESS OF

YRS

REMIT UNEX PORTION OF SENTENCE

TO CNF

GRANT DISCHARGE

☐

HON

☐

GEN

☐

UTOHC

☐

BCD

TRANSFER RETRAINING BRIGADE

SIGNATURE OF BOARD CHAIRMAN

DATE

SIGNATURE OF MILITARY MEMBER

SIGNATURE OF MILITARY MEMBER

DATE

SECTION III - APPROVING AUTHORITY ACTION

DATE

APPROVED

DISAPPROVED

BY ORDER OF THE SECRETARY OF THE ARMY